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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\****No CIS***\*\* FOREIGN APPLICATIONS \*\*\*\*\****CIS*

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**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY FINLAND	SHEETS DRAWING 8	TOTAL CLAIMS 60	INDEPENDENT CLAIMS 9
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>CJS</i> Examiner's Signature Initials				

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**TITLE**

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